

| POSITION | INITIALS | ID NO. | DATE |
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| BEST AVAILABLE COPY | | | |
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | DM | 70223 | 11-16-00 |
| RESPONSE FORMALITY REVIEW | | | 1/3/01 |

INDEX OF CLAIMS

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| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral) Canceled | A | Appeal |
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If more than 150 claims or 10 actions
staple additional sheet here

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